PROJECT 10073 RECORD CARD

1. DATE 11. Jul. 6.1	14 mi NW of Spring		D Was Bolloon D Probably Balloon D Possibly Balloon
3. DATE-TIME GROUP Local 1945 GMT_ 12004-52 5. PHOTOS D Yes ENO.	4. TYPE OF OBSERVATIO Ground-Visual Air-Visual 6. SOURCE Civilian 8. NUMBER OF OBJECTS	O Ground-Radar O Air-Intercept Radar	U Was Aircraft D Probably Aircraft D Possibly Aircraft D Probably Astronomical D Probably Astronomical D Possibly Astronomical D Possibly Astronomical D Insufficient Data for Evaluation
20 min 10. BRIEF SUMMARY OF SIGHTING 2 Passed directly overhead Vega. Color was like alus flection of sum. Hound in disappeared at 80° elev.	. Slightly larger that minumshining as re- n shape. Appeared and	for an a/e pass is categorized	iption is characteristic of duration is excessive ing overhead. This report Unidentified until such into is received that will

ATIC FORM 329 (REV 26 SEP 52)

U.S. AIR FORCE TECHNICAL INFORMATION SHEET

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes, and will be regarded as confidential material. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that, if it is deemed necessary, we may contact you for further details.

When did you see the object?	2. Time of day: Hour Minutes
Day Month Year	(Circle One): A.M. or P.M.
Time Zone: (Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other	(Circle One): a. Daylight Saving b. Standard
. Where were you when you saw the object?	
Where were you when you saw the object?	City or Town State or Country
Additional remarks:	
. How long was object in sight?	Hours Minutes Seconds
5.1 How was time in sight determined?	Hours Minutes Seconds
a. Certain b. Fairly certain	c. Not very sure d. Just a guess
. What was the condition of the sky?	
DAY	NIGHT &
a. Bright b. Cloudy	a. Bright b. Cloudy
. IF you saw the object during DAYLIGHT,	, where was the SUN located as you looked at the object?

a. None b. A few c. Many d. Den't remember 9. The object appeared: (Circle One): a. As a light b. Shiny c. Dark d. Den't remember 10. If it appeared as a light, was it brighter than the brightest stars? 11. Did the object: a. Appear to stand still at any time? b. Suddenly speed up and rush away at any time? c. Break up into parts or explode? c. Change brightness? c. Change shape? c. Change shape? g. Flash or flicker? h. Disappear and reappear? 12. Did the object move behind something at any time, particularly a cloud? (Circle One): Yes No Don't No Don't Know. IF you answered YES, the in front of: Yes No Don't Know. IF you answered YES, the in front of: Yes No Don't Know. IF you answered YES, the in front of: Yes No Don't Know. IF you answered YES, the infrant of: Yes No Don't Know. IF you answered YES, the infrant of: Yes No Don't Know. IF you answered YES, the infrant of: Yes No Don't Know. IF you answered YES, the infrant of: Yes No Don't Know. IF you answered YES, the infrant of: Yes No Don't Know. IF you answered YES, the infrant of:	did you notice concerning the STARS and MOON?	what did yo				8.
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14. Did the object appear: (Circle One).	No. Don't Know. IF you answered YES, then tell when the state of the s	No.	move in front of so	noved behinder object.	(Cir.	
15. Did you observe the object through any of the following?	e): a. Solid b. Transparent c. Vapor d. Don't Kno	e One):	appear: (Circle	he object	Did th	14.
		gh any of th	e the object through	ou observ	Did yo	15.
a. Eyeglasses Yes No e. Binoculars Yes No				Eyeglass	c.	
D. John grasses	No f. Telescope Yes No	s No	ses Yes	Sun glas	b.	
c. Windshield Yes No g. Theodolite Yes No d. Window glass Yes No h. Other		s No	eld Yes	Windshie	-	

	Tell in a few words the following things about the object. a. Sound b. Color Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.
	The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember IF there was MORE THAN ONE object, then how many were there?
19.	Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

0. Dra	w a picture that will show the motion that the object or objects made. Place an "A" at the beginning of path, a "B" at the end of the path, and show any changes in direction during the course.
	passed disatily overlined
1. Ho	w large did the object appear to you as compared to an object with which you are familiar?
6.5	wish to know the angular size. Hold a match stick at arm's length in line with a known object and note which we much of the object is covered by the head of the match. If you had performed this experiment at the time the sighting, how much of the object would have been covered by the match head?
23. D	id the object disappear while you were watching it? If so, how?
24. 1	n order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

e. South f. Southwest per hour. object?	g. West h. Northwest
f. Southwest per hour. object?	
per hour. object?	II. ITOTATISTOST
object?	
? (Circle One)	West
9	. Northwest
TATOTALIA	. Overhead
	West Northwest Overhead
to estimate the number of a	(elevation).
	. South

	CLOUDS (Circle One)	WEATHER (Circle One)			
	a. Clear sky	a. Dry			
	b. Hazy	b. Fog, mist, or light rain			
1	d. Thick or heavy clouds	c. Moderate or heavy rain d. Snow			
	d. Timek or neuvy clouds	e. Don't remember			
35.	When and to whom did you report that you had seen	n the object?			
	Doy Month	Year			
36.	Was anyone else with you at the time you saw the	object?			
	(Circle One) Yes No				
	36.1 IF you answered YES, did they see the object too?				
	(Circle One) Yes No				
	36.2 Please list their names and addresses:				
	enife to militalist.				
37.	Was this the first time that you had seen an objec	t or objects like this?			
	(Circle One) Yes No				
	37.1 IF you answered NO, then when, where, and	under what circumstances did you see other ones?			
38.	In your opinion what do you think the object was	and what might have caused it?			

30.	Do you think you can estimate the speed of the object?
921	
	IF you answered YES, then what speed would you estimate?
40.	Do you think you can estimate how far away from you the object was?
	(Circle One) Yes No
	IF you answered YES, then how far away would you say it was?
	Please give the following information about yourself:
41.	
	NAME & Middle Name Middle Name
	ADDRESS Street Zone State
	TELEPHONE NUMBER 277
	AgoSex
	Indicate any additional information about yourself, including any education, which might be pertinent.
42.	Date you completed this questionnaire: Day Month Year

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